

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>A. Boone</i>		<i>09-24-01</i>
O.I.P.E. CLASSIFIER	<i>LC</i>	<i>1024</i>	<i>10/14/01</i>
FORMALITY REVIEW	<i>M-H</i>	<i>625</i>	<i>11-13-01</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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*720*  
*10-04-01*  
*851*  
*11/14/01*